

## PERIODIC CONCESSION EVALUATION REPORT (Water Guide Service) – Standard No. XVII

**FORM 10-617 (Rev 10/87)**

Concid#:		Name of Concessioner:	
Region:		Facility/Service:	
Year of Evaluation:			

**NOTICE TO CONCESSIONER:** The elements (X) below were found deficient this date and must be corrected by the date(s) specified below. Failure to make correction(s) within the date(s) specified will result in downgrading the initial rating and may result in an unsatisfactory rating which may affect your

**ELEMENTS/CLASSIFICATION**  
**Check (Box) in space provided - applicable elements (APP.)**  
**Check (Box) in space provided - those which are deficient (DEF.)**

Element A. FACILITY EXTERIOR				APP.		DEF.		Element D. SERVICES				APP.		DEF.	
1.	Employee and/or Guide Training Programs (B)							15.	Food Service Sanitation (A)						
2.	Employee and/or Guide Performance (A)							16.	Food & Water Quality & Quantity (A)						
3.	Employee and/or Guide Attitude (A)							17.	Safety (A)						
4.	Employee and/or Guide Appearance (C)							Element E. ENVIRONMENTAL PROTECTION							
5.	Staffing (A)											APP.		DEF.	
6.	Qualification Requirements (A)							18.	Litter and Trash (A)						
Element B. FACILITY INTERIOR								19.	Sanitation/Human Waste (A)						
				APP.		DEF.		20.	Fire Plans and Fuel (A)						
7.	Authorized Rates (A)							21.	Restricted Areas (A)						
8.	Reservation and Deposit Refunds (B)							22.	Other Requirements (B)						
Element C. EQUIPMENT								Element F. ORIENTATION/INTERPRETATION							
				APP.		DEF.						APP.		DEF.	
9.	Watercraft (A)							23.	Visitor Safety Orientation (A)						
10.	Emergency Equipment (A)							24.	Trip Activities (B)						
11.	First Aid Kit (A)							25.	Program Content (B)						
12.	Personal Flotation Devices (A)							26.	Program Delivery (B)						
13.	Transportation Equipment (A)														
14.	Other Equipment (B)														
ITEM #	EVALUATION OBSERVATION										CORRECTED BY (Date)		CORRECTED BY (Date)		
EVALUATION DATE		# OF OBSERVATIONS BY CLASSIFICATIONS				NUMERIC PERIODIC RATING		NPS EVALUATOR SIGNATURE		CONCESSIONER SIGNATURE					
INITIAL		A		B		C		Preliminary							
FOLLOW-UP															
						Final									
REMARKS:															